

## **APPLICATION SUBMISSION CHECKLIST**

Please refer to the following checklist to ensure that your application submission is complete.

- ☐ Application is no longer than 5 pages (excluding cover sheet, budget form and attachments).
- ☐ Font size is at least 12 point and margins are at least 1 inch.
- ☐ Project narrative includes all required components and addresses all questions.
- ☐ Goal addressed from the Utah Genomics Plan is clearly marked on the Cover Sheet and project objectives and activities are tightly focused on the selected goal.
- ☐ Grant amount requested falls within the allowable range, and requested line items fall within allowable cost items.
- ☐ Budget totals have been checked for accuracy.
- ☐ Application includes all required attachments
  - Completed and signed Cover Sheet
  - Completed Work plan
  - Completed Budget Form
- ☐ Application includes optional attachments as deemed relevant to the application.
- ☐ Submission has been sent by mail or E-mail to:  
Chronic Disease Genomics Program  
PO Box 142106  
Salt Lake City, UT 84114-2106  
Email: [rgiles@utah.gov](mailto:rgiles@utah.gov)  
Attn: Rebecca Giles

**Applications must be received by 5:00PM on September 5, 2007. Late applications will not be accepted.**